

Brian Sandoval, Governor



Farolyn McSweeney, O.M.D., *President*  
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William Kim, M.D., *Member*

**STATE OF NEVADA  
BOARD OF ORIENTAL MEDICINE**

**\*\*INACTIVE STATUS\*\***

December 20, 2011

Dear Licensee:

Pursuant to NRS 634A.167 the annual fee for renewal in order to maintain your *inactive* license status with the Board of Oriental Medicine in the State of Nevada is coming due. Please remit a check or money order in the amount of Five Hundred Dollars (\$500.00) *made payable to the Nevada State Board of Oriental Medicine.*

Enclosed is the application for the License renewal that must be received by the board on or before January 31, 2012.

Renewal applications and payments should be mailed to:

State of Nevada Board of Oriental Medicine  
9775 S. Maryland Pkwy., Ste. F-280  
Las Vegas, NV 89183

This renewal form will be posted on the website at [www.oriental.nv.gov](http://www.oriental.nv.gov) under the "Licensee Info" tab. Should you have any questions please contact the board by phone at (702) 837-8921, or fax at (702) 914-8921.

Sincerely,

Amy Richards  
*Executive Director*  
Enc: Renewal Application

## INACTIVE LICENSEE UPDATE

Our records indicate that your license has been placed on an “inactive” status. Renewals for 2012 are due on January 31, 2012. If you would like to change your status to “active” please let our office know so that we can get the proper paperwork processed before the deadline.

Name: \_\_\_\_\_

(Please print the name as it appears on your license)

License Number: \_\_\_\_\_ Date of original issue: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of your business: \_\_\_\_\_

Business address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Office (\_\_\_\_) \_\_\_\_-\_\_\_\_ Fax: Office (\_\_\_\_) \_\_\_\_-\_\_\_\_

Email address: \_\_\_\_\_

### STATUS OF LICENSE:

\_\_\_\_\_ **I would like to remain INACTIVE at this time.**

\_\_\_\_\_ **I would like to REACTIVATE my license;** please send me the proper documentation to do so. I understand that this request must be received before January 31, 2012 in order to avoid any additional fees.

\*NOTE: Pursuant to NAC 634A.135(4) – A person who holds an inactive license is **exempt** from the requirements set forth in this section regarding continuing education. Therefore, no CEU information is necessary if you would like to remain inactive at this time.

\_\_\_\_\_  
Signature of Licensee

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date